



State of Rhode Island
Department of State - Business Services Division

2025

FILED

APR 25 2025

BY

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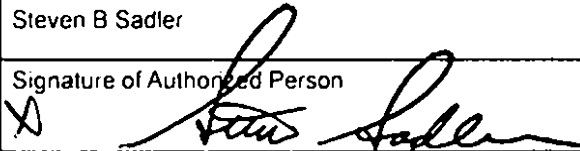
Annual Report for the year: _____

Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 1733721	2. Exact name of the Limited Liability Company Prefomance Northeast Services, LLC			
3. NAICS Code 561720	4. Brief description of the character of business conducted in Rhode Island Cleaning Services			
5. State of Formation Rhode Island				
6. Principal Office Address 323 New Boston St ste1		City Woburn	State MA	Zip 02801
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Steven B Sadler		Contact Title Member		
Street Address 323 New Boston St ste1		City Woburn	State MA	Zip 02801
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.				
Name of Authorized Person Steven B Sadler			Date	
Signature of Authorized Person 				

MAIL TO:

Division of Business Services

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